

11-08-04
3727/4
JFW

PTO/SB/82 (09-04)
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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/755,702
Filing Date	JANUARY 5, 2001
First Named Inventor	VIOLET HANSON
Art Unit	3727
Examiner Name	JES F. PASCUA
Attorney Docket Number	HANSON-2

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☐ The address associated with
Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	BERNARD S. HOFFMAN				
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

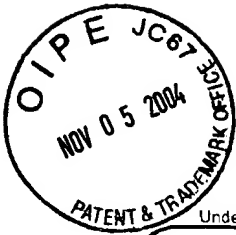
Signature			
Name	VIOLET HANSON		
Date	11/4/04	Telephone	(516) 349-5966

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. see below.

☒ *Total of 1 forms are submitted.

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	09/755,702
Filing Date	JANUARY 5, 2001
First Named Inventor	VIOLET HANSON
Title	FLAT BOTTOM BAG WITH HANDLE
Art Unit	3727
Examiner Name	JES F. PASCUA
Attorney Docket Number	HANSON-2

I hereby appoint:

☐

Practitioners associated with the Customer
Number:

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Practitioner(s) named below:

Name	Registration Number
BERNARD S. HOFFMAN	30,756

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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The address associated with Customer Number:

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Firm or
Individual Name

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(631) 331-8883

I am the:

☒

Applicant/Inventor.

☐

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Violet Hanson

Date

11/4/04

Name

VIOLET HANSON

Telephone

(516) 349-5966

Title and Company

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. see below.

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*Total of 1 forms are submitted.

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